

#8

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:) Group Art Unit: 2776
)
 Darryl Rubin et al.) Examiner: TBA
)
 Serial Number: 09/456,249) Attorney Docket No. 003797.85089
)
 Filed: Dec. 7, 1999)

For: COMPUTER USER INTERFACE ARCHITECTURE WHEREIN USER'S
INTERACT WITH BOTH CONTENT AND USER INTERFACE BY
ACTIVATING LINKS

INFORMATION DISCLOSURE STATEMENT

Commissioner of U.S. Patent and Trademark Office
Washington, D.C. 20231

Sir:

In accordance with Applicants' duty of disclosure, the following information is submitted for consideration by the United States Patent and Trademark Office in connection with the above-captioned application. The information is identified on the attached PTO 1449 form.

Applicants do not waive any right to take appropriate action to establish patentability over the listed documents should they be applied as references against the claims of the present application. The references contained in this information disclosure statement were either cited by the Examiner in related application U.S. Serial No. 09/456,127 on August 28, 2002 or in related application U.S. Serial No. 09/456,975 on October 22, 2002.

Information Disclosure Statement

Serial No. 09/456,249

Page 2

The accompanying Information Disclosure Statement is being filed before the receipt of a first Office Action on the merits. No certification or fee is required. However, in the event a fee is due, please charge Deposit Account No. 19-0733. Further, the Commissioner is authorized to charge any additional fees that may be required or credit any overpayment to our Deposit Account No. 19-0733.

The undersigned certifies under 37 C.F.R. § 1.97(e)(2) that no item of information contained in the information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the undersigned after making reasonable inquiry, no item of information contained in the information disclosure statement was known to any individual designated in 37 C.F.R. § 1.56(c) more than three months prior to the filing of the information disclosure statement.

It is respectfully requested that the Examiner fully consider each of the documents, initial the enclosed Form PTO-1449 in the appropriate place to indicate that the document has been considered, and return a copy of the initialed form to the undersigned in accordance with MPEP Section 609.

Respectfully submitted,

Date: Nov. 27, 2002

By: Gary D. Fedorochko
Gary D. Fedorochko
Registration No. 35,509

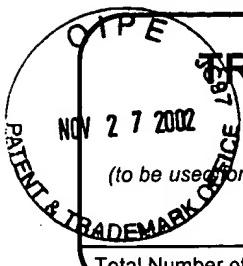
Banner & Witcoff, LTD
1001 G Street, N.W.
Washington, D.C. 20001-4597
(202) 508-9100

Please type a plus sign (+) inside this box →

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

7

| | |
|----------------------|---------------------|
| Application Number | 09/456,249 |
| Filing Date | 12/07/99 |
| First Named Inventor | Darryl Rubin et al. |
| Group Art Unit | 2776 |
| Examiner Name | TBA |

Attorney Docket Number

003797.85089

ENCLOSURES (check all that apply)

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO 1449 and 14 references |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input checked="" type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| | Remarks | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|-------------------------------------|
| Firm or Individual name | Gary D. Fedorochko, Reg. No. 35,509 |
| Signature | |
| Date | Nov. 27, 2002 |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

| | | |
|-----------------------|--|------|
| Typed or printed name | | Date |
| Signature | | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)
0

| Complete if Known | |
|----------------------|---------------------|
| Application Number | 09/456,249 |
| Filing Date | 12/07/99 |
| First Named Inventor | Darryl Rubin et al. |
| Examiner Name | TBA |
| Group / Art Unit | 2776 |
| Attorney Docket No. | 003797.85089 |

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Other None
 Order
 Deposit Account:Deposit Account Number
19-0733Deposit Account Name
Banner & Witcoff, Ltd.

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|-----------------|----------|
| Fee Code | Fee Code | Fee (\$) | Fee (\$) |
| 101 | 740 | 201 | 370 |
| 106 | 330 | 206 | 165 |
| 107 | 510 | 207 | 255 |
| 108 | 740 | 208 | 370 |
| 114 | 160 | 214 | 80 |

SUBTOTAL (1)

(\$)
0

2. EXTRA CLAIM FEES

| Total Claims | Independent Claims | Extra Claims | Fee from below | Fee Paid |
|--------------|--------------------|--------------|----------------|----------|
| [] - | [] - | ** = 0 | X [] = 0 | |
| [] - | [] - | ** = 0 | X [] = 0 | |
| | | | X [] = 0 | |

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description |
|----------|----------|----------|----------|--|
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 | 42 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2)

(\$)
0

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|-----------------|----------|
| Fee Code | Fee Code | Fee (\$) | Fee (\$) |
| 105 | 130 | 205 | 65 |
| 127 | 50 | 227 | 25 |
| 139 | 130 | 139 | 130 |
| 147 | 2,520 | 147 | 2,520 |
| 112 | 920* | 112 | 920* |
| 113 | 1,840* | 113 | 1,840* |
| 115 | 110 | 215 | 55 |
| 116 | 400 | 216 | 200 |
| 117 | 920 | 217 | 460 |
| 118 | 1,440 | 218 | 720 |
| 128 | 1,960 | 228 | 980 |
| 119 | 320 | 219 | 160 |
| 120 | 320 | 220 | 160 |
| 121 | 280 | 221 | 140 |
| 138 | 1,510 | 138 | 1,510 |
| 140 | 110 | 240 | 55 |
| 141 | 1,280 | 241 | 640 |
| 142 | 1,280 | 242 | 640 |
| 143 | 460 | 243 | 230 |
| 144 | 620 | 244 | 310 |
| 122 | 130 | 122 | 130 |
| 123 | 50 | 123 | 50 |
| 126 | 180 | 126 | 180 |
| 581 | 40 | 581 | 40 |
| 146 | 740 | 246 | 370 |
| 149 | 740 | 249 | 370 |
| 179 | 740 | 279 | 370 |
| 169 | 900 | 169 | 900 |

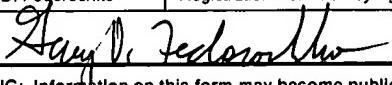
Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)
0

*or number previously paid, if greater; For Reissues, see above

| SUBMITTED BY | | | | | | Complete (if applicable) | |
|-------------------|---|----------------------------------|--------|-----------|----------------|--------------------------|--------------|
| Name (Print/Type) | Gary D. Fedorochko | Registration No. Attorney/Agent) | 35,509 | Telephone | (202) 508-9223 | | |
| Signature |  | | | | | Date | Nov 27, 2002 |

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